



ACKNOWLEDGEMENT OF NOTIFICATION
OF REGULATED WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Regulated Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+
P20980555254

01/14/97-

INSTALLATION ADDRESS

SUN DARRY CREEK TANK FARM
CALCON HOOK & HOOK ROADS
DARBY, PA 19023
ERIC SCHWEIDER ENVL MGR

CALCON HOOK & HOOK ROADS
DARBY, PA 19023



Sun Company, Inc.
Ten Penn Center
1801 Market Street
Philadelphia PA 19103-1699

December 4, 1996

Mr. Hon Lee
United States Environmental Protection Agency
Region III
RCRA Programs (3HW80)
PA Operations Branch
841 Chestnut Building
Philadelphia, PA 19107

DAVID CREEK TANK
FARM

Dear Mr. Lee:

The following information is being supplied as you requested concerning the Sun Company Inc. refineries in Pennsylvania. This information is being provided to assure that the USEPA understands Sun's terminology for these refineries, particularly since some of them have undergone several name changes.

Philadelphia Refinery

The Philadelphia Refinery currently consists of two processing areas: Point Breeze and Girard Point. These facilities originally obtained their USEPA ID Numbers under the names of Atlantic Richfield Company (ARCO) and Gulf Oil Products Company (Gulf) respectively.

Point Breeze

1 FN Atlantic Refining and Marketing Co
The Point Breeze Processing Area of the Philadelphia Refinery was purchased from ARCO by Atlantic Refining & Marketing Corp. in 1985, and retained the original USEPA ID Number of PAD002289700. In 1988, Sun Company, Inc. purchased the parent company of Atlantic Refining and Marketing Corp., Atlantic Petroleum Maatshappi, B.V. This was a stock purchase and the Atlantic Refining & Marketing Corp. continues to be the owner of the Point Breeze Processing Area. However, since 1988, Sun Company, Inc. (R&M), a wholly owned subsidiary of Sun Company, Inc., has been the operator of the facility.

Girard Point

The Girard Point Processing Area of the Philadelphia Refinery was purchased from Chevron USA in August, 1994. Chevron had purchased the stock of Gulf in 1983. The original Gulf EPA ID Number (PAD049791098) has continued in use under both Chevron and Sun ownership. Sun Company, Inc. (R&M) is the owner and operator of this facility.

Associated Facilities

Across the Schuylkill River from the Girard Point Processing Area is the Schuylkill River Tank Farm. This facility's EPA ID Number, PAD980555312, is also unchanged from the original Gulf number. When Sun purchased the Girard Point Processing Area from Chevron in 1994, Sun also purchased the nearby Darby Creek Tank Farm (PAD980555254) and Hog Island Wharf (PAD000647289). These facilities also have the original Gulf EPA ID Numbers.

Marcus Hook Refinery

Sun Company Inc. (R&M) is the original owner and operator of the Marcus Hook Refinery, EPA ID Number PAD980550594.

The table below summarizes, the various names and EPA ID Numbers for Sun's Pennsylvania refinery operations.

Current Name	Previous Name(s)	EPA ID Number	Facility Type
Sun Point Breeze	Atlantic, ARCO	PAD002289700	Generator, TSD
Sun Girard Point	Chevron, Gulf	PAD049791098	Generator, TSD
Sun Schuylkill River Tank Farm	Chevron, Gulf Schuylkill River Tank Farm	PAD980555312	Generator Not a TSD 4
Sun Darby Creek Tank Farm	Chevron, Gulf Darby Creek Tank Farm	PAD980555254	Generator Not a TSD 4
Sun Hog Island Wharf	Chevron, Gulf Hog Island Wharf	PAD000647289	Generator
Sun Marcus Hook Refinery	Not applicable	PAD980550594 Gary Rabik	Generator, TSD

Please call me at 215-977-6442 if you have any questions or require any additional information.

Very truly yours,

Charles D. Barksdale Jr.
Charles D. Barksdale Jr., P.E.
Managing Environmental Consultant

cc: L. Lunsik, PaDEP

Eric Schneider as contact for 5 sites
Env. MGR (610) 859-1176
Env. MGR (215) 338-2091
12 per call

AFV
BAH/12 12/13/96

08/04/94

OTN:

8/10/94

12 per call

Atlantic refining and Marketing Co
Sun Co Inc (R&M)
HL Ref B
Chevron USA Inc
SRIF
Chevron USA Inc
PCTF
HL
FOR USA Inc
HL
refining and Marketing Co



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EPA I.D. NUMBER

+ PAD980555254

03/10/97

INSTALLATION ADDRESS

SUN DARBY CREEK TANK FARM
3144 PASSYUNK AVE
PHILADELPHIA , PA 19145
ERIC SCHNEIDER ENVL MGR

CALCON HOOK & HOOK ROADS
DARBY , PA 19023



PHILADELPHIA REFINERY
3144 PASSYUNK AVENUE
PHILADELPHIA, PA 19145

FAX #(215) 339-2657

FAX TRANSMITTAL SHEET

DATE: 2/4/97 FROM: Jim Tucker

NUMBER OF PAGES (Including This Sheet): 2

TO: LYNN CHOW

COMPANY: NOTIFICATION OF REGULATED WASTE ACTIVITY

REGARDING: 7

LYNN, I MAILED THIS LETTER ON 1/27/97. IT WAS
RETURNED ON 2/3/97. IT WAS STAMPED RETURN TO SENDER

NOTE: If any of these fax copies are illegible, or you do not receive the same number of pages as stated above, please contact us immediately at: (215) 339 - 2120.

VEN/VAR/FORMS/FAX

Philadelphia Refinery



Sun Company, Inc.
3144 Passyunk Avenue
Philadelphia PA 19145-6299
215 339 2000

January 27, 1997

US EPA
Region 3
RCRA Program
3HW80
841 Chestnut Street
Philadelphia, PA 19107
Attention: Lynn Chow
Subject: Acknowledgment of Notification of Regulated Waste Activity

Dear Miss Chow:

Please document the following addresses for each of the following EPA numbers associated with Sun Company, Inc. (R&M). I have received the notifications for Girard Point and Point Breeze but not for the other three locations. Please mail the notifications for the missing three at your earliest convenience.

- ~~*Philadelphia Refinery - Point Breeze Processing Area - EPA# PAD002289700~~ ✓
△ 3144 Passyunk Avenue
Philadelphia, PA 19145
~~*Philadelphia Refinery - Girard Point Processing Area - PAD049791098~~ ✓
3144 Passyunk Avenue
Philadelphia, PA 19145
~~*Schuylkill River Tank Farm - PAD980555312~~ ✓
3144 Passyunk Avenue
Philadelphia, PA 19145
~~*Darby Creek Tank Farm - PAD980555254~~ ✓
3144 Passyunk Avenue
Philadelphia, PA 19145
~~*Hog Island Wharf - PAD000647289~~ ✓
3144 Passyunk Avenue
Philadelphia, PA 19145

Change mailing add
& send Ack. for
all of them.

Sincerely,

Jim Tucker
Environmental Specialist
215-339-2120

BAH/lz 2/11/97

REAU OF SOLID WASTE MANAGEMENT NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

I. INSTALLATION'S EPA I.D. NUMBER															
P A D 9 8 0 5 5 5 2 5 4															
II. NAME OF INSTALLATION															
Gulf Oil Corp., Darby Creek Tank Farm															
III. INSTALLATION MAILING ADDRESS															
STREET OR P.O. BOX															
P.O. Box 7408															
CITY OR TOWN										ST.		ZIP CODE			
Philadelphia										P A		19101			
IV. LOCATION OF INSTALLATION															
STREET OR ROUTE NUMBER										MUNICIPALITY					
Calgon Hook & Hook Roads										Darby Township					
CITY OR TOWN										ST.		ZIP CODE		COUNTY	
Darby Township										P A				Delaware	
V. INSTALLATION CONTACT															
NAME AND TITLE (last, first, & job title)										PHONE NO. (area code & no.)					
Williams, John H. Director Technical Services										2 1 5		3 3 9 7 1 2			
VI. OWNERSHIP															
A. NAME OF INSTALLATION'S LEGAL OWNER															
Gulf Oil Corporation															
B. TYPE OF OWNERSHIP															
(enter the appropriate letter into box)															
F - FEDERAL M - NON-FEDERAL															
M															
VII SIC CODES (4-digit in order of priority)															
A. FIRST						C. THIRD									
29 1 1 (specify) Petroleum Refining						(specify) TP 1 0 8 4									
B. SECOND						D. FOURTH									
(specify)						(specify)									
VIII. TYPE OF HAZARDOUS WASTE ACTIVITY															
<input type="checkbox"/> A. GENERATION <input type="checkbox"/> C. STORE <input type="checkbox"/> E. TRANSPORTATION (COMPLETE ITEM IX) <input type="checkbox"/> G. REUSE, RECYCLE, RECLAIM															
<input type="checkbox"/> B. TREAT <input type="checkbox"/> D. DISPOSE <input type="checkbox"/> F. PERMIT BY RULE <input type="checkbox"/> H. OTHER (specify):															
IX. MODE OF TRANSPORTATION (transporters only)															
<input type="checkbox"/> A. AIR <input type="checkbox"/> B. RAIL <input type="checkbox"/> C. HIGHWAY <input type="checkbox"/> D. WATER <input type="checkbox"/> E. OTHER (specify):															
X. EXISTING ENVIRONMENTAL PROGRAM PERMITS															
A. NPDES (Discharges to Surface Water)						D. PSD (Air Emissions from Proposed Sources)									
P A 0 0 1 1 5 4 1															
B. UIC (Underground Injection of Fluids)						E. SOLID WASTE									
C. RCRA (Hazardous Wastes)						F. OTHER (specify):									
						S E E ATTACHED PaDER air quality operating permit									
XI. TYPE OF NOTIFICATION															
Mark "X" in appropriate box to indicate whether this is your installation's first notification of hazardous waste activity, or notification of a change of general information, hazardous waste handled, or hazardous waste activity. If you check B, C, D, E, or F, attach a letter of explanation. (SEE INSTRUCTIONS).															
<input type="checkbox"/> A. FIRST NOTIFICATION <input type="checkbox"/> C. DELETION OF A WASTE <input type="checkbox"/> E. DELETION OF AN ACTIVITY															
<input type="checkbox"/> B. CHANGE OF GENERAL INFORMATION <input type="checkbox"/> D. ADDITION OF A WASTE <input type="checkbox"/> F. ADDITION OF AN ACTIVITY															

CONTINUE ON REVERSE

XII DESCRIPTION OF HAZARDOUS WASTES (Continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from §75.261(h)(2) for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from §75.261(h)(3) each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from §75.261(h)(4) for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See §75.261(g)(2) through (5))

☐ 1. IGNITABLE
 ☐ 2. CORROSIVE
 ☐ 3. REACTIVE
 ☐ 4. EXTREMELY TOXIC

XIII CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

Theron D. Higginbotham

NAME and OFFICIAL TITLE (Type or Print)

Theron D. Higginbotham Refinery Manager

DATE SIGNED

8-29-84

FOR OFFICIAL USE ONLY



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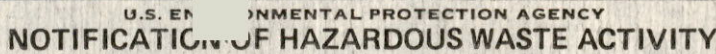
EPA I.D. NUMBER

• PAT 00 064 7271

Mr. John Williams
Gulf Oil Corp. - Darby Creek Tank Farm
P. O. Box 7408
Phila., PA 19101

INSTALLATION ADDRESS

Calcon Hook and Hook Roads
Darby Township, PA



CONTINUE ON REVERSE

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
K 0 4 9	K 0 5 0	K 0 5 1			
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
U 0 1 3					
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

F. A. Becker

NAME & OFFICIAL TITLE (type or print)

F. A. Becker
Refinery Manager

DATE SIGNED

8/1/80



Chevron U.S.A. Inc.
P.O. Box 7408, Philadelphia, PA 19101

G. R. Moffitt
General Manager
Philadelphia Refinery

REGISTERED MAIL

January 10, 1992

Mr. Paul Gotthold, Chief
EPA Region III
PA/DC Permits Section (3HW51)
Hazardous Waste Management Division
841 Chestnut Street
Philadelphia, PA. 19107

Dear Mr. Gotthold:

RCRA Permit No. PAD049791098
Class 1 Permit Modification

In compliance with 40 C.F.R. § 270.42, we are submitting the following Class 1 permit modification. Effective January 1, 1992, the Philadelphia Refinery and its RCRA permitted Treatment and Storage facility are part of Chevron U.S.A. Products Company.

The facilities listed below, all associated with the Philadelphia Refinery, also become part of the Chevron U.S.A. Products Company.

- o Schuylkill River Tank Farm PAD980555312
70th Street & Essington Avenue
Philadelphia, PA. 19153
- o Darby Creek Tank Farm PAD980555254
Calgon Hook & Hook Roads
Darby Township, PA. 19023
- o Hog Island Wharf PAD000647289
Hog Island Road
Tinicum Township, PA. 19029

If you have any questions or need additional information, please contact Mike Manigly (Environmental Specialist - Waste) at (215) 339-7466.

Very truly yours,

GR Moffitt
G. R. Moffitt

LINDA
FILE
RECEIVED
PA SECTION

JAN 17 REC'D

EPA, R3

Gulf Oil Products Company

PHILADELPHIA REFINERY

P. O. Box 7408
Philadelphia, PA 19101

June 20, 1985

U. S. Environmental Protection Agency
Region III
841 Chestnut Street
Philadelphia, PA 19107

Gentlemen:

Re: NAME CHANGE TO CHEVRON USA, INC.

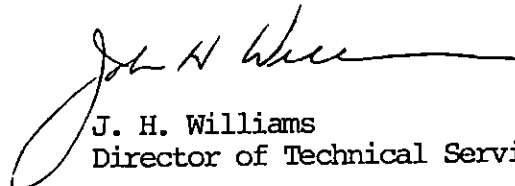
This is to advise The U. S. Environmental Protection Agency, Region III, that effective July 1, 1985, the name of Gulf Oil Corporation will be changed to Chevron USA, Inc. As you probably know Chevron has acquired Gulf, and this name change is merely a part of our reorganization.

This change affects the following Permits:

<u>NPDES</u>	<u>RCRA (Interim Status)</u>
PA 0011533	PAD - 049791098 (Phila.)
PA 0011541	PAD - 980555312 (SRIF)
PA 0011550	PAD - 980555254 (DCIF)
	PAD - 000647289 (HIW)

If you have any questions about our name change, please contact
J. H. Williams at (215) 339-7125.

Very truly yours,


J. H. Williams
Director of Technical Services

DSG/lmck

CC: C Kleeman 3WM52

*generator - chgd name
6/25/85*

Gulf Oil Products Company

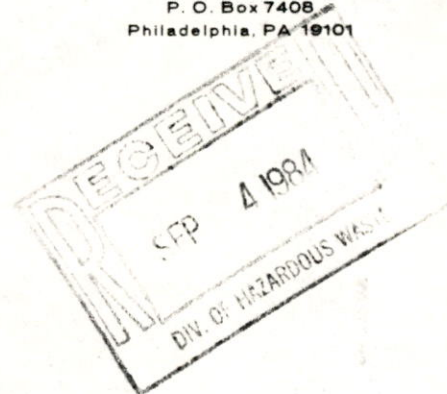
PHILADELPHIA REFINERY
RECEIVED
STATE PROGRAMS SECTION

P. O. Box 7408
Philadelphia, PA 19101

T. D. Higginbotham
REFINERY MANAGER
W. A. Hackney
MANAGER - ENGINEERING & MAINTENANCE
K. W. Johnson
MANAGER - FINANCE & SERVICES
E. E. Schoeberlein
MANAGER - OPERATIONS
Q. L. Wallerstedt
MANAGER - HUMAN RESOURCES

FEB 12 1985

U.S. EPA, REGION III
August 28, 1984



Commonwealth of Pennsylvania
Department of Environmental Resources
P. O. Box 2063
Harrisburg, PA 17120

Gentlemen:

Attached are three Notification of Hazardous Waste Activity forms updating activities for the following facilities:

1. Hog Island Wharf EPA ID No. PAD000647289 - NH
2. Darby Creek Tank Farm EPA ID No. PAD980555254 - *called 11/05/84*
3. Schuylkill River Tank Farm EPA ID No. PAD980555312 - *called 11/05/84*

All changes are the result of extensive conversation with and inspections by Mr. Robert Zang of your Ridley State Park office.

Hog Island Wharf has never generated any hazardous waste since our August 1980 notification to EPA, therefore, we request that the facility be able to maintain its hazardous waste I.D. number in the event of a spill that may be a hazardous material. As we presently generate no hazardous waste at the facility, we no longer care to retain our generator status.

Darby Creek Tank Farm was originally listed as a result of our strict interpretation of the rule regarding API type separator sludge from the petroleum refining industry. Darby Creek Tank Farm has a concrete separator that skims oil from water generated from the drawing off of water from oil tankage. We assumed that the EPA considered separator sludge hazardous for all facilities related to the oil business. Since the basis for listing separator sludge was lead and chromium contamination, we have reconsidered our notification. Darby Creek Tank Farm has no chromium treated cooling water which is the source of chromium in separator sludge. The facility has no leaded products in storage nor do we have any lead addition facilities at the tank farm. Based on the lack of a source of lead or chromium we feel the separator sludge is a non-hazardous residual waste and should be handled accordingly. In the event the sludge was classified hazardous we would still require that storage (S02) and treatment (S01) be removed from our permit notification as separator sludge is neither treated or stored within the separator. Waste water is only treated in the separator as nonhazardous and the sludge is not generated



until the separator is taken out of service and the waste water removed much the same as the solids left in a leaded gasoline tank once the product is removed and the tank is opened for cleaning. In either case the sludge would continue to be incinerated in our sludge incinerator located at the Philadelphia Refinery.

The notification for Schuylkill River Tank Farm originally requested interim status for container storage (S01), tank storage (S02), and the tank treatment (T01). We request the waste activities at this facility be changed to reflect the removal of tank storage and treatment which were originally reported for an API type separator which has an NPDES permit, the separator neither treats or stores a hazardous waste but rather generates a waste when the separator is removed from service; the waste generated would be considered hazardous for lead contamination. Since K051 was designated hazardous as API separator sludge from the petroleum refining industry, it is our understanding this designation applies strictly to the refining industry and not to tank farms located outside the refineries.

If this is indeed the case, K051 would not apply to the tank farm facility thus requiring a unique hazardous waste number. Since our analytical data illustrates the sludge to pass the characteristic of EP toxicity it would not be practical to apply the number D008 for lead. Therefore, for lack of a better selection we will continue to call the waste stream K051.

Should you have any questions regarding this matter contact Mr. Frank Hannigan at 215-339-7466.

Very truly yours,


T. D. Higginbotham

FLH/vad
Attachment



GULF OIL COMPANY - U. S.
PROCESS ENGINEERING - PHILADELPHIA REFINERY

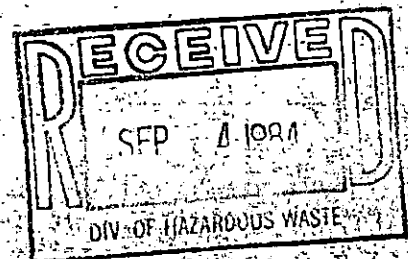
PaDER AIR QUALITY
OPERATING PERMITS
FOR DARBY CREEK TANK FARM

23-302-073

23-312-117

23-312-118

23-312-086



EPA HAZARDOUS WASTE SURVEYS

912105

PROBLEM CARD

C072108

CARD #

01

GN

IN

LF

TK

Q. _____

SI

CN

COL. _____

LT

IW

WP

X TG

BATCH

CODERS NAME:

0933

Annapurna

PROBLEM: Q 60 C 9m excess of 8 mm

Q 5 h same trial (f)

Total (m) - 9

SOLUTION: _____

DATA RETRIEVAL (DATE) _____

CHANGE # _____

DECISION # _____

SUPERVISOR

Per RCRA
hotline -

Doesn't store
until after he generates
which is when he
cleans out the tank

U.S. ENVIRONMENTAL PROTECTION AGENCY
HAZARDOUS WASTE TREATMENT, STORAGE AND DISPOSAL
GENERAL QUESTIONNAIRE

CERTIFIED MAIL # 660984
PAD980555254 TK GN TG C072108
WILLIAMS J. DIR PROCESS ENG.
GULF OIL CORP. DARBY CREEK TANK FARM
PO BOX 7408
PHILADELPHIA (215) 339-7125 PA 19101

1 1 0 1 0 1 0 1 0 1 0 1 0 1 1
GN LF SI LT WP IN TK CN IW TG

PLEASE RECORD THE FOLLOWING INFORMATION, ONLY IF DIFFERENT FROM LABEL ABOVE.

Name of Facility: _____

Facility EPA
Identification Number: | | | | | | | | | | | | | | | | | | | | | |

Mailing Address: _____
STREET OR P.O. BOX

CITY STATE ZIP CODE

1. Please record the location of this facility.*

*PLEASE GIVE THE ACTUAL PHYSICAL LOCATION OF THE FACILITY CORRESPONDING TO
THE EPA IDENTIFICATION NUMBER ABOVE, RATHER THAN ITS MAILING ADDRESS.

ADDRESS: Calgon Hook & Hook Roads
CITY: Darby Township COUNTY: Delaware
STATE: Pennsylvania ZIP CODE: 19023

2. Whom should we contact for follow-up at this facility?

NAME: John H. Williams

TITLE: Director - Process Engineering

PHONE NUMBER: 215 - 339 - 7125 EXTENSION:
AREA CODE

3. Please indicate the type(s) of hazardous waste activity(ies) in which this installation was engaged during the 1981 calendar year. [CIRCLE ALL CODES THAT APPLY]

- | | | | |
|--|----|--|--------|
| a. Hazardous waste generation. | 01 | <div style="border: 1px solid black; padding: 5px; display: inline-block;"> GO ON TO
QUESTION 4 </div> | /73-74 |
| b. Hazardous waste treatment | 02 | | /75-76 |
| c. Hazardous waste storage | 03 | | /77-78 |
| d. Hazardous waste disposal. | 04 | | /7 |
| e. Hazardous waste transportation. | 05 | | /81-82 |
| f. Recycling of hazardous waste. | 06 | | /83-84 |
| g. None of the above | 07 | | /85-86 |

IF CODES "02", "03" AND/OR "04" ARE CIRCLED, PLEASE GO TO QUESTION 4.

IF YOU HAVE NOT CIRCLED CODES "02," "03" OR "04," PLEASE SIGN THE CERTIFICATION STATEMENT ON PAGE 37 AND RETURN THIS QUESTIONNAIRE TO EPA.

4. What was the year in which waste management operations first began at this facility? (That is, in what year was the original construction/development of the waste management operations completed?)

YEAR WASTE MANAGEMENT BEGAN: 9/19/49

/87-90

5. Please give the sizes of each of the following waste management areas at this facility.
[ENTER SIZES AND CIRCLE UNIT CODE BELOW. PLEASE USE THE SAME UNIT OF MEASURE FOR THE
ENTIRE TABLE]

[02]

	Size of area	
a. Landfill.	N/A 0	/16-23
b. Surface impoundments.	N/A 0	/24-31
c. Waste piles	N/A 0	/32-39
d. Incinerators.	N/A 0	/40-47
e. Land treatment, application, or farming	N/A 0	/48-55
f. Treatment tank areas.	2838	/56-63
g. Container storage areas	N/A 0	/64-71
h. Storage tank areas.	2838 Same Tank as (f)	/72-79
i. Underground injection wells (surface operation area only)	N/A 0	/80-87
j. Recycling	N/A 0	/88-95
k. Common waste management area.	N/A 0	/96-103
l. Other waste management operations	N/A 0	/104-111
m. TOTAL WASTE MANAGEMENT AREA AT FACILITY	2838 5676	/112-119
n. TOTAL AREA OF FACILITY.	4,238,824	/120-127

[CIRCLE ONE]:

Square feet. 01
 Square yards 02
 Acres. 03
 Other [SPECIFY]: _____ 04

/128-129

- * 6. Please complete the following table for the employees engaged in the waste management operations at this facility.

1031

ON LINE 6a: Enter the usual number of employees from each of the occupation categories who are engaged in the waste management operations.

ON LINE 6b: Enter the average hourly wage of the employees within each occupational category who are engaged in waste management operations. [IF THIS INFORMATION IS NOT AVAILABLE SEPARATELY FOR WASTE MANAGEMENT EMPLOYEES, PLEASE CHECK HERE AND GIVE THE INFORMATION, BY OCCUPATIONAL CATEGORY, FOR THE ENTIRE FACILITY]

8/16

ON LINES 6c

THROUGH 6n: Indicate the total number of person-hours per week devoted to each of the listed operations by the waste management employees in each of the occupational categories. [FOR EXAMPLE, IF THREE LABORATORY WORKERS USUALLY SPEND TEN HOURS PER WEEK EACH ENGAGED IN ACTIVITIES RELATED TO THE LANDFILL OPERATION AT THIS FACILITY, ENTER "30" ON LINE 6c UNDER THE COLUMN LABELED "LABORATORY AND PROFESSIONALS"]

	Laboratory & professionals	Drivers & equipment operators	All other skilled employees	Non-skilled employees	TOTAL	
6a. <u>Number of employees</u> engaged in waste management operations at this facility	+				+	/17-36
6b. Average <u>hourly wage</u> for waste management employees in each occupational category	+				+	/37-56
6c. Total person-hours per week in <u>landfill</u> operations	+				+	/57-81
6d. Total person-hours per week in <u>surface impoundment</u> operations	+				+	/82-
6e. Total person-hours per week in <u>waste piles</u> operations	+				+	104 /16-40
6f. Total person-hours per week in <u>incinerator</u> operations	+				+	/41-65
6g. Total person-hours per week in <u>land treatment</u> (including land application, land farming) operations	+				+	/66-90

*Cannot segregate the time spent on the management of hazardous waste facilities, since this is a petroleum storage tank farm not a hazardous waste facility.

	Laboratory & professionals	Drivers & equipment operators	All other skilled employees	Non-skilled employees	TOTAL	
6h. Total person-hours per week in <u>treatment tank</u> operations	+				+	/91-115
6i. Total person-hours per week in <u>container storage</u> operations	+				+	<u>105</u> /16-40
6j. Total person-hours per week in <u>storage tank</u> operations	+				+	/41-65
6k. Total person-hours per week in <u>underground injection well</u> operations	+				+	/66-90
6l. Total person-hours per week in <u>recycling</u> operations	+				+	/91-115
6m. Total person-hours per week in <u>other waste management</u> operations	+				+	<u>106</u> /16-40
6n. Total person-hours per week in <u>ALL waste management</u> operations at this facility [TOTAL ON LINE 6n SHOULD EQUAL THE SUM OF LINES 6c THROUGH 6m]:	+				+	/41-65

7. In the table below, please list the primary SIC (Standard Industrial Classification) code of this facility, and up to three secondary SIC codes, if more than one code is required to describe this facility. [IF YOU DO NOT KNOW THE SIC CODE(S) FOR THIS FACILITY, PLEASE SELECT THE MOST APPROPRIATE CODE(S) FROM APPENDIX C IN THE GENERAL INSTRUCTIONS]

a. Primary SIC code	<u>2</u> <u>9</u> <u>1</u> <u>1</u>	/66-69
Secondary SIC codes [PLEASE LIST IN DESCENDING ORDER OF IMPORTANCE]:		
b.	 	/70-73
c.	 	/74-77
d.	 	/78-

8. Please specify the ownership status of this facility. That is, is the facility owned by the federal government, a state government, a local government (such as a city, town, county or parish), or is it privately owned? [CIRCLE ONLY ONE CODE]

Solely owned by federal government 01

Solely owned by state government 02

Solely owned by local government 03

Privately owned. 04

Other [SPECIFY]: _____ 05

/82-83

9. Please specify the status of the operator of this facility. That is, is the facility operated by the federal government, a state government, a local government (such as a city, town, county, or parish), or is it privately operated? [CIRCLE ONLY ONE CODE]

Solely operated by federal government. 01

Solely operated by state government. 02

Solely operated by local government. 03

Privately operated 04

Other [SPECIFY]: _____ 05

/84-85

10. What was the total quantity of waste (both hazardous and nonhazardous) that this facility treated, stored or disposed on this site during 1981? [ENTER QUANTITY AND CIRCLE UNIT CODE]

NOTE: WHAT IS DESIRED HERE IS THE QUANTITY OF WASTE THAT "CAME THROUGH THE FRONT DOOR," OR ENTERED THE FACILITY'S TREATMENT, STORAGE, OR DISPOSAL OPERATIONS, IN 1981, COUNTING ONLY ONCE ANY QUANTITIES OF WASTES OR WASTE MIXTURES THAT WERE REPROCESSED THROUGH MULTIPLE TECHNOLOGIES, OR TREATMENT, STORAGE, OR DISPOSAL CHAINS.

QUANTITY OF
WASTE HANDLED: 46

/86-94

[CIRCLE ONE]:

Metric tonnes. 01
English (or short) tons. 02
Gallons. 03
Other [SPECIFY]: _____ 04

/95-96

11. What was the total quantity of waste (both hazardous and nonhazardous) that this facility could have treated, stored or disposed on site during 1981, if the facility had been operating at full capacity the whole year? [SEE NOTE TO QUESTION 10. ENTER QUANTITY AND CIRCLE UNIT CODE]

QUANTITY THAT COULD ~~Question not applicable~~
HAVE BEEN HANDLED: ~~to this facility.~~

/97-105

[CIRCLE ONE]:

Metric tonnes. 01
English (or short) tons. 02
Gallons. 03
Other [SPECIFY]: _____ 04

~~11~~ /106-107

12. What was the total quantity of hazardous waste that this facility treated, stored or disposed on site during 1981? [SEE NOTE TO QUESTION 10. ENTER QUANTITY AND CIRCLE UNIT CODE]

QUANTITY OF HAZARDOUS

WASTE HANDLED: _____

46

/108-116

[CIRCLE ONE]:

Metric tonnes. 01

English (or short) tons. 02

Gallons. 03

Other [SPECIFY]: _____ 04

/117-118

13. What was the total quantity of hazardous waste that this facility could have treated, stored or disposed on site during 1981, if the facility had been operating at full capacity the whole year? [SEE NOTE TO QUESTION 10. ENTER QUANTITY AND CIRCLE UNIT CODE]

QUANTITY OF HAZARDOUS WASTE THAT COULD

HAVE BEEN HANDLED: _____

~~Question not applicable to this facility.~~

/119-127

[CIRCLE ONE]:

Metric tonnes. 01

English (or short) tons. 02

Gallons. 03

Other [SPECIFY]: _____ 04

/128-129

14. During 1981, what percentage of the hazardous waste (specified in Question 12) entered into the treatment, storage and/or disposal operation by:

107

	Percent	
a. Containers.	0 %	/16-18
b. Tank trucks	0 %	/19-21
c. Dump trucks	0 %	/22-24
d. Railroad cars	0 %	/25-27
e. Pipeline.	100 %	/28-30
f. Other [SPECIFY]: _____	0 %	/31-33

TOTAL SHOULD EQUAL

100 %

/34-35

15. Please provide the following information in the table below.

LINE A: Enter the quantities of wastes (both hazardous and nonhazardous) that were disposed of, treated, and/or stored, at the facility during 1981; [SEE NOTE BELOW]

LINE B: Enter the quantities of wastes (both hazardous and nonhazardous) that could have been disposed of, treated, and/or stored, at the facility during 1981, if the facility had been operating at full capacity the whole year; [SEE NOTE BELOW]

LINE C: Enter the quantities of hazardous wastes that were disposed of, treated, and/or stored, at the facility during 1981; [SEE NOTE BELOW]

LINE D: Enter the quantities of hazardous wastes that could have been disposed of, treated, and/or stored, at the facility during 1981, if the facility had been operating at full capacity the whole year. [SEE NOTE BELOW]

ENTER QUANTITIES ON THE TABLE BELOW AND CIRCLE THE UNIT CODE BELOW THE TABLE. PLEASE USE THE SAME UNIT OF MEASURE FOR ALL ANSWERS ON THE TABLE.

NOTE: TOTALS IN LINES A THROUGH D MAY EQUAL OR EXCEED ASSOCIATED TOTAL QUANTITIES PROVIDED IN QUESTIONS 10, 11, 12 AND 13, DUE TO MULTIPLE PROCESSING OF INDIVIDUAL WASTES OR WASTE MIXTURES. WHAT IS DESIRED HERE IS THE TOTAL QUANTITY OF WASTE THAT WAS INPUT, OR COULD BE INPUT, TO EACH PROCESS DURING 1981, REGARDLESS OF WHATEVER OTHER PROCESSES MAY HAVE BEEN APPLIED PREVIOUSLY OR SUBSEQUENTLY TO THE SAME WASTE, OR PORTIONS THEREOF.

	Finally disposed of at facility ¹ <u>X</u> Did not dispose in 1981	Treated ² at facility — Did not treat in 1981	Stored ³ at facility — Did not store in 1981	
a. Quantities of <u>wastes</u> that <u>were</u> :	<u>+ — — +</u>	<u>65,342</u>	<u>9 — 0 — 9</u>	122 /36-38
b. Quantities of <u>wastes</u> that <u>could have been</u> :	<u>+ — — +</u>	<u>9 — 9</u> Not Applicable	<u>9 — 8</u> Not Applicable	/39-65 /66-92
c. Quantities of <u>hazardous wastes</u> that <u>were</u> :	<u>+ — — +</u>	<u>9 — 9</u> Not Applicable	<u>46</u>	/93-119
d. Quantities of <u>hazardous wastes</u> that <u>could have been</u> :	<u>+ — — +</u>	<u>9 — 8</u> Not Available	<u>9 — 8</u> Not Available	108 /16-42

[CIRCLE ONE]:

Metric tonnes. 01
 English (or short) tons. 02
 Gallons. 03
 Other [SPECIFY]: _____ 04

¹ Include quantities disposed via: landfill, land application (land treatment, land farming), disposal surface impoundments, underground injection wells, ocean disposal, other disposal processes.

² Include quantities chemically, physically, biologically, or thermally treated in: tanks, treatment surface impoundments, incinerators, other treatment processes.

³ Include quantities stored in: containers, tanks, waste piles, storage surface impoundments, other storage processes.

16. In the table below, please indicate which waste processing technologies were operating at this facility during 1981. [CIRCLE ONE CODE FOR EACH TECHNOLOGY]

Circle code 1 if the technology was in existence at the facility during 1981, was operational during 1981, and processed hazardous waste during 1981;

Circle code 2 if the technology was in existence at the facility during 1981, was operational during 1981, but did not process hazardous waste during 1981;

Circle code 3 if the technology was in existence at the facility during 1981, but was not operational during 1981;

Circle code 4 if the technology was under construction at the facility during 1981.

Circle code 5 if the technology was not in existence and not under construction at the facility during 1981.

Waste processing technology	In existence, operational, processed hazardous waste in 1981	In existence, operational, did not process hazardous waste in 1981	In existence, not operational in 1981	Under construction in 1981	Not in existence in 1981	
a. Underground injection well	1	2	3	4	5	/45
b. Landfill	1	2	3	4	5	/46
c. Land application area	1	2	3	4	5	/47
d. Ocean disposal	1	2	3	4	5	/48
e. Disposal surface impoundment	1	2	3	4	5	/49
f. Treatment tanks	1	2	3	4	5	/50
g. Treatment surface impoundment	1	2	3	4	5	/51
h. Incinerator	1	2	3	4	5	/52
i. Storage containers	1	2	3	4	5	/53
j. Storage tanks	1	2	3	4	5	/54
k. Waste piles	1	2	3	4	5	/55
l. Storage surface impoundment	1	2	3	4	5	/56
m. Other [SPECIFY]: _____	1	2	3	4	5	/57
						/58-59

17. Please complete the following table for the ten hazardous wastes handled in largest volume by this facility in 1981. [PLEASE RECORD THE EPA WASTE NUMBERS OF WASTES HANDLED, BEGINNING WITH THE LARGEST VOLUME WASTE, IN THE COLUMNS ACROSS THE TOP OF THE TABLE. A LIST OF EPA WASTE CODES IS INCLUDED IN THE GENERAL INSTRUCTIONS AS APPENDIX A.]

<p>EPA WASTE NUMBER:</p> <p>AND DESCRIPTION OF WASTE:</p>	<p><u>1K10511</u></p> <p><u>Primary</u></p> <p><u>Separator</u></p> <p><u>Sludge</u></p>	<p>1 1 1 1 1 1 1 1 1 1</p>	<p>1 1 1 1 1 1 1 1 1 1</p>
<p>17a. What was the total quantity of this waste that was handled by this facility during 1981? [ENTER QUANTITY AND CIRCLE UNIT CODE FOR EACH WASTE]</p> <p>QUANTITY HANDLED IN 1981:</p> <p>[CIRCLE ONE]:</p> <p>Metric tonnes</p> <p>English (or short) tons .</p> <p>Gallons</p> <p>Other [SPECIFY]:.</p>	<p><u>46</u></p> <p>01</p> <p><u>02</u></p> <p>03</p> <p>04</p>	<p>+</p> <p>01</p> <p>02</p> <p>03</p> <p>04</p> <p>+</p>	<p>+</p> <p>01</p> <p>02</p> <p>03</p> <p>04</p> <p>+</p>
<p>17b. Was this waste stored at this facility? [CIRCLE ONLY ONE CODE]</p> <p>Yes [GO TO QUESTION 17c] . . .</p> <p>No [SKIP TO QUESTION 17e FOR THIS WASTE].</p>	<p><u>1</u></p> <p>2</p>	<p>1</p> <p>2 +</p>	<p>1</p> <p>2 +</p>
<p>17c. What was the total quantity that entered storage in 1981? [ENTER QUANTITY AND CIRCLE UNIT CODE]</p> <p>TOTAL QUANTITY STORED . .</p> <p>[CIRCLE ONE]:</p> <p>Metric tonnes</p> <p>English (or short) tons .</p> <p>Gallons</p> <p>Other [SPECIFY]:.</p>	<p><u>46</u></p> <p>01</p> <p><u>02</u></p> <p>03</p> <p>04</p>	<p>+</p> <p>01</p> <p>02</p> <p>03</p> <p>04</p> <p>+</p>	<p>+</p> <p>01</p> <p>02</p> <p>03</p> <p>04</p> <p>+</p>

_____							/60-99
_____	_____	_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	_____	_____	
							<u>109</u>
_____							/16-105
01	01	01	01	01	01	01	
02	02	02	02	02	02	02	
03	03	03	03	03	03	03	
04	04	04	04	04	04	04	
_____							/106-125
							<u>110</u>
1	1	1	1	1	1	1	
2	2	2	2	2	2	2	/16-25

_____							/26-115
01	01	01	01	01	01	01	
02	02	02	02	02	02	02	
03	03	03	03	03	03	03	<u>111</u>
04	04	04	04	04	04	04	/16-35

QUESTION 17 IS CONTINUED ON THE NEXT PAGE.

EPA WASTE NUMBER:	<u>K</u> <u>0</u> <u>5</u> <u>1</u>	<u> </u> <u> </u> <u> </u> <u> </u>	<u> </u> <u> </u> <u> </u> <u> </u>
17d. What was the storage method for this waste? [CIRCLE ONLY ONE CODE. IF MORE THAN ONE METHOD WAS USED FOR A SINGLE WASTE TYPE, CIRCLE CODE "05" AND SPECIFY CODES "01" THROUGH "04," CORRESPONDING TO THE METHODS USED, IN ORDER FROM THE MOST PREVALENTLY USED METHOD TO THE LEAST]			
Storage in tanks	<u>(01)</u>	01	01
Storage in containers. . .	02	02	02
Storage in surface impoundments	03	03	03
Storage in waste piles . .	04	04	04
Other [SPECIFY]:	05	05	05
	<hr/>	<hr/>	<hr/>
17e. Was this waste treated at this facility? [CIRCLE ONLY ONE CODE]			
Yes [GO TO QUESTION 17f] . .	1	1	1
No [SKIP TO QUESTION 17h FOR THIS WASTE].	<u>(2)</u>	2	2
17f. What was the total quantity treated in 1981? [DO NOT "DOUBLE COUNT" AMOUNTS OF A SINGLE WASTE THAT WERE PUT THROUGH MULTIPLE TREATMENT PROCESSES. ENTER QUANTITY AND CIRCLE UNIT CODE]			
TOTAL QUANTITY TREATED	<hr/>	<hr/>	<hr/>
[CIRCLE ONE]:			
Metric tonnes.	01	01	01
English (or short) tons.	02	02	02
Gallons.	03	03	03
Other [SPECIFY]: . .	04	04	04
	<hr/>	<hr/>	<hr/>

01	01	01	01	01	01	01	
02	02	02	02	02	02	02	
03	03	03	03	03	03	03	
04	04	04	04	04	04	04	
05	05	05	05	05	05	05	
<hr/>							/36-55
1	1	1	1	1	1	1	
2	2	2	2	2	2	2	
<hr/>							/56-65
<hr/>							12
<hr/>							/16-105
01	01	01	01	01	01	01	
02	02	02	02	02	02	02	
03	03	03	03	03	03	03	
04	04	04	04	04	04	04	
<hr/>							/106-125

QUESTION 17 IS CONTINUED ON THE NEXT PAGE.

EPA WASTE NUMBER:		K 0 5 1 1		
17g. What treatment process was used for this waste? [CIRCLE ONLY ONE CODE. IF MORE THAN ONE METHOD WAS USED FOR A SINGLE WASTE TYPE, CIRCLE CODE "04" AND SPECIFY CODES "01" THROUGH "03," CORRESPONDING TO THE METHODS USED, IN ORDER FROM THE MOST PREVALENTLY USED METHOD TO THE LEAST]				
Treatment in tank(s) . . .	01	01	01	
Treatment in surface impoundment(s)	02	02	02	
Treatment by incineration	03	03	03	
Other [SPECIFY]:	04	04	04	
	_____	_____	_____	
17h. Was this waste disposed at this facility? [CIRCLE ONLY ONE CODE]				
Yes [GO TO QUESTION 17i].	1	1	1	
No [SKIP QUESTIONS 17i AND 17j FOR THIS WASTE]	2	2	2	
17i. What was the total quantity disposed in 1981? [ENTER QUANTITY AND CIRCLE UNIT CODE]				
TOTAL QUANTITY DISPOSED:	0			
[CIRCLE ONE]:				
Gallons	01	01	01	
English (or short) tons	02	02	02	
Metric tonnes	03	03	03	
Other [SPECIFY]:	04	04	04	
	_____	_____	_____	

01	01	01	01	01	01	01	
02	02	02	02	02	02	02	
03	03	03	03	03	03	03	
04	04	04	04	04	04	04	
<hr/>							/16-35
1	1	1	1	1	1	1	
2	2	2	2	2	2	2	
<hr/>							/36-45
<hr/>							/16-105
01	01	01	01	01	01	01	
02	02	02	02	02	02	02	
03	03	03	03	03	03	03	
04	04	04	04	04	04	04	
<hr/>							/106-125

QUESTION 17 IS CONTINUED ON THE NEXT PAGE.

EPA WASTE NUMBER:		K 0 5 1		
17j. What disposal process was used for this waste? [CIRCLE ONLY ONE CODE. IF MORE THAN ONE METHOD WAS USED FOR A SINGLE WASTE TYPE, CIRCLE CODE "05" AND SPECIFY CODES "01" THROUGH "04," CORRESPONDING TO THE METHODS USED, IN ORDER FROM THE MOST PREVALENTLY USED METHOD TO THE LEAST]				
Disposal in injection wells.	01	01	01	
Disposal in landfill . . .	02	02	02	
Disposal in surface impoundments	03	03	03	
Disposal by land application.	04	04	04	
Other [SPECIFY]:	<u>05</u>	05	05	
	*			

*None disposed of in 1981. All sludge contained in an operational API Separator discharging to a P.O.T.W. The sludge is hazardous by definition, no form of lead or chromium is available at this site to contaminate the sludge.

01	01	01	01	01	01	01
02	02	02	02	02	02	02
03	03	03	03	03	03	03
04	04	04	04	04	04	04
05	05	05	05	05	05	05

151

/16-35

18. During 1981, did this facility receive any hazardous waste for treatment, storage or disposal that was generated off site? [CIRCLE ONLY ONE CODE]

Yes [GO TO QUESTION 19]. 1

☒ No [SKIP TO QUESTION 25]. 2

/36

19. What was the total quantity of hazardous waste received for treatment, storage or disposal by this facility from off-site sources during 1981? [ENTER QUANTITY AND CIRCLE UNIT CODE]

QUANTITY FROM
OFF-SITE SOURCES: _____

/37-45

[CIRCLE ONE]:

Metric tonnes. 01

English (or short) tons. 02

Gallons. 03

Other [SPECIFY]: _____ 04

/46-47

20. What percentage of this quantity of hazardous waste (as specified in Question 19) was received in:

a. Containers. %

/48-50

b. Tank trucks %

/51-53

c. Dump trucks %

/54-56

d. Railroad cars %

/57-59

e. Pipeline. %

/60-62

f. Other [SPECIFY]: _____ %

/63-65

TOTAL SHOULD EQUAL 100 %

/66-67

21. What percentage of this quantity of hazardous waste (as specified in Question 19) came from sources owned by other firms?

PERCENT FROM SOURCES
OWNED BY OTHER FIRMS: _____ %

/68-70

22. What percentage of this quantity of hazardous waste (as specified in Question 19) came from small generators (who are subject to the special provisions under RCRA)?

PERCENT FROM SMALL

GENERATORS: _____ % /71-73

23. In Column A of the table below, list the SIC codes of the five industries from which this facility received the greatest quantity of hazardous waste for treatment, storage or disposal in 1981. [IF YOU DO NOT KNOW THE SIC CODES OF THESE INDUSTRIES, PLEASE SELECT THE APPROPRIATE CODES FROM APPENDIX C IN THE GENERAL INSTRUCTIONS.]

In Column B, indicate the percent of the total amount of hazardous waste received from off-site sources (specified in Question 19) that was received from each of the five industries.

COLUMN A SIC codes of five largest generators	COLUMN B Percent of total hazardous waste received
a.	_____ %
b.	_____ %
c.	_____ %
d.	_____ %
e.	_____ %

/74-80

/81-87

/88-94

/95-101

/102-108

24. How was the hazardous waste content of waste shipments received by this facility during 1981 determined? Please specify the percentage of shipments for which:

- a. Laboratory analyses were performed by this facility _____ % /109-111
- b. Documentation of waste characteristics was provided by the off-site source _____ % /112-114
- c. Documentation of waste characteristics was taken from data on similar wastes _____ % /115-117
- d. Other [SPECIFY]: _____ % /118-120
- _____ % /121-122

II. GROUNDWATER MONITORING

116

25. Please indicate whether this facility has ever used or currently uses any of the following methods to prevent contamination of the aquifers or groundwater. For each method used, indicate the year and cost of installation. [CIRCLE ONE CODE FOR EACH METHOD, AND ENTER YEAR AND COST WHERE APPLICABLE]

	Yes	No	Year started	Cost	
a. Slurry wall	1	<u>2</u>	<u> </u>	\$ <u> </u>	/16-29
b. Counterpumping.	1	<u>2</u>	<u> </u>	\$ <u> </u>	/30-43
c. Other [SPECIFY]: <u> </u>	1	<u>2</u>	<u> </u>	\$ <u> </u>	/44-57
<u> </u>					
<u> </u>					/58-59

26. Does this facility have groundwater monitoring wells? [CIRCLE ONLY ONE CODE]

Yes [GO ON TO QUESTION 27] 1 /60
No [SKIP TO QUESTION 29]. 2

27. How many hydraulically upgradient, and how many hydraulically downgradient wells for groundwater monitoring does this facility have?

a. NUMBER OF UPGRADIENT WELLS. /61-62
 b. NUMBER OF DOWNGRADIENT WELLS. /63-64

28. Please describe up to six of this facility's groundwater monitoring wells, giving the specifications for at least one hydraulically upgradient well, and at least three hydraulically downgradient wells which are used to comply with the groundwater monitoring standards.

	Well 1	Well 2	Well 3	Well 4	Well 5	Well 6
a. Is this an upgradient or downgradient well? [CIRCLE ONLY ONE CODE]						
Upgradient	1	1	1	1	1	1
Downgradient	2	2	2	2	2	2
b. What is the depth of this well in feet?						
DEPTH.	(FEET)	(FEET)	(FEET)	(FEET)	(FEET)	(FEET)
c. What was the approximate cost of installing this well? [INCLUDE LABOR, MATERIALS AND FEES]						
INSTALLATION COST.	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
d. In what year was this well installed?						
YEAR INSTALLED . . .	(YEAR)	(YEAR)	(YEAR)	(YEAR)	(YEAR)	(YEAR)
e. How frequently are samples from this well drawn and analyzed? [ENTER FREQUENCY AND CIRCLE TIME UNIT CODE]						
FREQUENCY:						
[CIRCLE ONE]:						
Per month.	01	01	01	01	01	01
Per year	02	02	02	02	02	02
Other [SPECIFY]: .	03	03	03	03	03	03

/65-70

/71-94

|17|

/16-69

/70-93

/94-111

/112-123

29. Are there any geologic/hydrogeologic studies of this facility? [CIRCLE ONLY ONE CODE]

Yes 1 /124
No 2

III. SITE GEOGRAPHY

30. Is this facility located within one mile of a fault that has had displacement within the past 10,000 years (Holocene time)? [CIRCLE ONLY ONE CODE]

Yes [GO ON TO QUESTION 31]. 1 /125
No [SKIP TO QUESTION 37] 2
Don't know [SKIP TO QUESTION 37]. 8

31. How close is this facility to the fault?

DISTANCE FROM FAULT: |||| feet /126-129

32. Has this facility experienced any seismic ground motion activity (e.g., subsidence, shaking, displacement) since its construction? [CIRCLE ONLY ONE CODE]

[18]

Yes [GO ON TO QUESTION 33].	1	/16
No [SKIP TO QUESTION 37]	2	
Don't know [SKIP TO QUESTION 37].	8	

33. What type of seismic ground motion has this facility experienced? [CIRCLE ONE CODE FOR EACH ITEM]

	<u>Yes</u>	<u>No</u>	
a. Ground failure (liquefaction or slope stability).	1	2	/17
b. Earthquakes (shaking).	1	2	/18
c. Fault displacement	1	2	/19
d. Ground subsidence.	1	2	/20
e. Other [SPECIFY]: _____	1	2	/21
_____			/22-23

34. What was the intensity of the most severe seismic event experienced by this facility as measured by the Richter Magnitude Scale? [CIRCLE ONLY ONE CODE]

Less than 2 on the Richter scale.	01	
From 2 up to 4 on the Richter scale	02	
From 4 up to 6 on the Richter scale	03	
From 6 up to 8 on the Richter scale	04	
8 or greater on the Richter scale	05	
Don't know.	98	/24-25

35. Did any seismic ground motion event ever damage any portion of this facility? [CIRCLE ONLY ONE CODE]

Yes	1	/26
No.	2	

36. Has this facility incorporated any of the following design or locational criteria to mitigate the severity of ground motion induced damages? [CIRCLE ONE CODE FOR EACH ITEM]

	Yes	No	
a. Structural reinforcement	1	2	/27
b. Site analysis (geologic)	1	2	/28
c. Construction materials	1	2	/29
d. Structural design magnitude.	1	2	/30
e. Other [SPECIFY]: _____	1	2	/31
_____			/32-33

37. Is this facility, or a portion of this facility, located in a floodplain? [CIRCLE ONLY ONE CODE]

Yes [GO ON TO QUESTION 38]. 1

No [SKIP TO QUESTION 40] 2 /34

Don't know [SKIP TO QUESTION 40]. 8

38. Which of the following best describes the floodplain on which this facility is located? [CIRCLE ONLY ONE CODE]

Riverine. 01

Coastal 02

Other [SPECIFY]: _____ 03

/35-36

39. Which of the following best describes the frequency of flooding of the floodplain on which this facility is located? [CIRCLE ONLY ONE CODE]

Floods annually 01

Ten year floodplain 02

Fifty year floodplain 03

One hundred year floodplain 04

Five hundred year floodplain. 05

Other [SPECIFY]: _____ 06

/37-38

40. Has this facility ever been flooded? [CIRCLE ONLY ONE CODE]

Yes [GO ON TO QUESTION 41] 1

No [SKIP TO QUESTION 43]. 2 /39

41. What was the magnitude of the most severe flood experienced by this facility? [CIRCLE ONLY ONE CODE]

A 50 year flood 01

A 100 year flood. 02

A 500 year flood. 03

Other [SPECIFY]: _____ 04

Don't know. 98 /40-41

42. Has hazardous waste ever been released from this facility as a result of a flood? [CIRCLE ONLY ONE CODE]

Yes 1

No. 2 /42

Don't know. 8

43. What types of flood protection does this facility currently have in place? [CIRCLE ONE CODE FOR EACH TYPE OF PROTECTION]

IF THIS FACILITY DOES NOT CURRENTLY HAVE FLOOD PROTECTION,
CHECK HERE ☐ AND SKIP TO QUESTION 45.

	Yes	No	
a. Levee.	<u>1</u>	2	/44
b. Elevation.	1	<u>2</u>	/45
c. Structural reinforcement	1	<u>2</u>	/46
d. Warning system (waste removal prior to flood).	1	<u>2</u>	/47
e. Other [SPECIFY]: _____	1	<u>2</u>	/48
			<u>11</u> /49-50

44. Why was the flood protection instituted at this installation? [CIRCLE ONE CODE FOR EACH REASON]

	Yes	No	
a. RCRA	1	<input checked="" type="radio"/> 2	/51
b. Local regulation	1	<input checked="" type="radio"/> 2	/52
c. State regulation	1	<input checked="" type="radio"/> 2	/53
d. Insurance requirements	1	<input checked="" type="radio"/> 2	/54
e. Self-protection.	<input checked="" type="radio"/> 1	2	/55
f. Other [SPECIFY]: _____	1	<input checked="" type="radio"/> 2	/56
			/57-58

The following questions relate to the quantity of waste which is recycled rather than discarded. This would include wastes which are used or reused, as for raw materials in production processes; or recycled or reclaimed, such as solvent redistillation, scrap metal reclaimed by secondary smelter, or wastes which are blended to make fuels. Beneficial use also includes "wastes used in a manner constituting disposal" such as waste applied directly to the land as dust suppressants or as fertilizers.

45. Did this facility generate or receive any hazardous waste that was used, reused, recycled, or reclaimed (either on site or off site) before 1981? [CIRCLE ONLY ONE CODE]

Yes	1	
<input checked="" type="radio"/> No		<input checked="" type="radio"/> 2

/59

46. Will any hazardous waste generated or received by this facility be used, reused, recycled, or reclaimed (either on site or off site) after 1981? [CIRCLE ONLY ONE CODE]

Yes	1	
<input checked="" type="radio"/> No		<input checked="" type="radio"/> 2

/60

47. Did this facility generate or receive hazardous wastes that were used, reused, recycled, or reclaimed (either on site or off site) during 1981? [CIRCLE ONLY ONE CODE]

Yes [GO ON TO QUESTION 48]	1	
<input checked="" type="radio"/> No [SKIP TO QUESTION 52].		<input checked="" type="radio"/> 2

/61

48. In the table below, please specify the total quantity of hazardous waste generated or received at this facility that was used, reused, recycled or reclaimed (either on site or off site) during 1981. Of this total, indicate the quantity that was recycled on site at this facility during 1981; the quantity that was shipped off site during 1981 for recycling at a facility owned by this firm; and the quantity that was shipped off site during 1981 for recycling at a facility owned by another firm. [ENTER QUANTITIES AND CIRCLE UNIT CODE. PLEASE USE THE SAME UNIT OF MEASURE THROUGHOUT THE TABLE]

	QUANTITY	
a. Total quantity generated or received that was used, reused, recycled, or reclaimed during 1981 [THE TOTAL QUANTITY REPORTED ON THIS LINE SHOULD EQUAL THE SUM OF THE QUANTITIES ON LINES b, c, AND d BELOW].	<u>0</u>	/62-70
b. Quantity recycled <u>on site</u> during 1981	<u>0</u>	/71-79
c. Quantity shipped off site during 1981 for recycling at a facility owned by <u>this</u> firm	<u>0</u>	/80-88
d. Quantity shipped off site during 1981 for recycling at a facility owned by <u>another</u> firm.	<u>0</u>	/89-97

[CIRCLE ONE]:

Metric tonnes. 01
 English (or short) tons. 02
 Gallons. 03
 Other [SPECIFY]: _____ 04

/98-99

49. Please complete the following table for the five principal hazardous wastes generated or received by this facility which were shipped off site in greatest volume for use, reuse, recycling or reclamation during the 1981 calendar year. [REFER TO FACING PAGE FOR INSTRUCTIONS FOR COMPLETING EACH COLUMN OF THE TABLE]

IF THIS FACILITY DID NOT SHIP ANY HAZARDOUS WASTES OFF SITE TO BE USED, REUSED, RECYCLED OR RECLAIMED DURING 1981, CHECK HERE ☒ AND SKIP TO QUESTION 50.

/100

/101

COLUMN A	COLUMN B	COLUMN C
EPA Number <u>AND</u> description of waste shipped off site for use, reuse, recycling, or reclamation	EPA Identification Numbers of three facilities to which waste was sent in greatest volume for use, reuse recycling, or reclamation	Quantity of waste shipped to each facility during 1981*
a. Description: _____	 	_____ _____ _____
b. Description: _____	 	_____ _____ _____
c. Description: _____	 	_____ _____ _____
d. Description: _____	 	_____ _____ _____
e. Description: _____	 	_____ _____ _____

*[CIRCLE ONE]:

Metric tonnes. 01

English (or short) tons. 02

Gallons. 03

Other [SPECIFY]: _____ 04

COLUMN A: ENTER THE EPA WASTE NUMBERS AND SHORT DESCRIPTIONS OF THE FIVE WASTES, INCLUDING DESCRIPTIONS OF THE PROCESSES THROUGH WHICH EACH WASTE WAS GENERATED. [EPA WASTE CODES ARE LISTED IN APPENDIX A OF THE GENERAL INSTRUCTIONS]

COLUMN B: ENTER THE EPA IDENTIFICATION NUMBERS OF THE THREE FACILITIES TO WHICH EACH WASTE WAS SHIPPED IN GREATEST VOLUME.

COLUMN C: INDICATE THE QUANTITY OF WASTE SHIPPED TO EACH FACILITY AND CIRCLE THE UNIT CODE AT THE BOTTOM OF THE COLUMN. PLEASE USE THE SAME UNIT OF MEASURE FOR ALL WASTES IN THE TABLE.

COLUMN D: CIRCLE THE CODE OR CODES THAT INDICATE HOW EACH WASTE WAS STORED PRIOR TO SHIPMENT OFF SITE FOR USE, REUSE, RECYCLING, OR RECLAMATION.

COLUMN E: FOR EACH FACILITY, INDICATE THE AVERAGE NUMBER OF DAYS EACH WASTE WAS STORED PRIOR TO SHIPMENT OFF SITE FOR USE, REUSE, RECYCLING, OR RECLAMATION.

[19R]

COLUMN D						COLUMN E Average number of days waste was stored prior to shipment off site for use, reuse, recycling, or reclamation.
How was waste stored prior to shipment off site for use, reuse, recycling, or reclamation? [CIRCLE ALL THAT APPLY FOR EACH FACILITY]						
In containers	In above ground tanks	In below ground tanks	In piles	In surface impoundments	Other [SPECIFY]:	
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days

50. Please complete the following table for the five principal hazardous wastes which this facility used, reused, recycled, or reclaimed, on site in greatest volume during the 1981 calendar year. [REFER TO FACING PAGE FOR INSTRUCTIONS FOR COMPLETING EACH COLUMN OF THE TABLE]

IF THIS FACILITY DID NOT USE, REUSE, RECYCLE, OR RECLAIM ANY HAZARDOUS WASTES ON SITE IN 1981, CHECK HERE ☒ AND SKIP TO QUESTION 52.

/102

/103

COLUMN A EPA Number <u>AND</u> description of waste used, re- used, recycled or reclaimed on site	COLUMN B How was this waste used, reused, recycled or reclaimed? [CIRCLE ALL THAT APPLY]					COLUMN C Quantity of waste used, reused, re- cycled or reclaimed during 1981*
	As feed- stock in manufac- turing process	As fuel or fuel supple- ment	In manner consti- tuting disposal	Reclaimed	Other [SPECIFY]:	
a. __ __ __ __ Description: _____	01	02	03	04	05 _____ _____ _____	_____ _____ _____
b. __ __ __ __ Description: _____	01	02	03	04	05 _____ _____ _____	_____ _____ _____
c. __ __ __ __ Description: _____	01	02	03	04	05 _____ _____ _____	_____ _____ _____
d. __ __ __ __ Description: _____	01	02	03	04	05 _____ _____ _____	_____ _____ _____
e. __ __ __ __ Description: _____	01	02	03	04	05 _____ _____ _____	_____ _____ _____

*[CIRCLE ONE]:

Metric tonnes 01
 English (or short) tons 02
 Gallons 03
 Other [SPECIFY]: _____ 04

COLUMN A: ENTER THE EPA WASTE NUMBERS AND SHORT DESCRIPTIONS OF THE FIVE WASTES, INCLUDING THE NAMES OF THE WASTES AND DESCRIPTIONS OF THE PROCESSES THROUGH WHICH EACH WASTE WAS GENERATED. [EPA WASTE CODES ARE LISTED IN APPENDIX A OF THE GENERAL INSTRUCTIONS]

COLUMN B: CIRCLE THE CODE OR CODES THAT DESCRIBE HOW THIS WASTE WAS USED, REUSED, RECYCLED OR RECLAIMED DURING 1981.

COLUMN C: INDICATE THE AVERAGE QUANTITY OF WASTE USED, REUSED, RECYCLED OR RECLAIMED DURING 1981 AND CIRCLE THE UNIT CODE AT THE BOTTOM OF THE TABLE. PLEASE USE THE SAME UNIT OF MEASURE FOR ALL WASTES IN THE TABLE.

COLUMN D: CIRCLE THE CODE OR CODES THAT INDICATE HOW EACH WASTE WAS STORED PRIOR TO USE, REUSE, RECYCLING, OR RECLAMATION.

COLUMN E: FOR EACH FACILITY, INDICATE THE AVERAGE NUMBER OF DAYS EACH WASTE WAS STORED PRIOR TO USE, REUSE, RECYCLING, OR RECLAMATION.

COLUMN D How was waste stored prior to use, reuse, recycling, or reclamation? [CIRCLE ALL THAT APPLY]						COLUMN E Average number of days waste was stored prior to use, reuse, recycling, or reclamation.
In con- tainers	In above ground tanks	In below ground tanks	In piles	In surface impound- ments	Other [SPECIFY]:	
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days
01	02	03	04	05	06 _____	_____ Days

[20R]

51. For each waste indicated in Question 50 as being used in a manner constituting disposal ("03" circled in Column B), please describe the specific manner in which the waste was used. 21

N/A

16-17

X. FINANCIAL ASSURANCE

52. How will closure and/or post closure costs be covered for this facility? [CIRCLE ONE CODE FOR EACH COVERAGE METHOD]

COVERAGE BY:	Closure costs only	Post-closure costs only	Both closure and post-closure	Neither closure nor post-closure	
a. Trust fund.	1	2	3	4	9 /18
b. Surety bond	1	2	3	4	/19
c. Letter of credit.	1	2	3	4	/20
d. Financial test.	1	2	3	4	/21
e. Insurance policy.	1	2	3	4	/22
f. Corporate guarantee	1	2	3	4	/23
g. State guarantee	1	2	3	4	/24
h. Federal or state exemption.	1	2	3	4	/25
i. Other [SPECIFY]: _____	1	2	3	4	9 /26
_____					16-17

53. What are the annual administrative charges for maintaining the financial assurance mechanisms listed in Question 52?

	Dollars per year	
a. Closure.	\$ 9 — 9	/29-37
b. Post-closure	\$ 9 — 9	/38-46
c. TOTAL ADMINISTRATIVE COSTS. . .	\$ 9 — 9	/47-55

54. Did this facility or the company that owns this facility put up collateral for financial assurance coverage? [CIRCLE ONLY ONE CODE]

Yes [GO ON TO QUESTION 55] 1 9/56
No [SKIP TO QUESTION 56]. 2

55. What is the value of the collateral?

VALUE OF COLLATERAL: \$ /57-65

56. Does this facility have liability insurance for third party damages (i.e., bodily injury and property damage) resulting from sudden or nonsudden releases of hazardous waste?
[CIRCLE ONLY ONE CODE]

Yes [GO ON TO QUESTION 57] 1

No [PLEASE SIGN THE CERTIFICATION STATEMENT
ON PAGE 37 AND RETURN THIS FORM TO EPA]. 2

/66

57. In what year did this facility obtain liability insurance for third party damages? [IF MORE THAN ONE POLICY HAS BEEN WRITTEN FOR THIS FACILITY, PLEASE GIVE THE YEAR THE MOST RECENT POLICY WAS OBTAINED]

YEAR LIABILITY INSURANCE OBTAINED: 3/1/81 /67-75

58. In order to obtain liability insurance, was it necessary to upgrade this facility, modify current practices at this facility, or have a risk assessment of this facility performed?
[CIRCLE ONE CODE FOR EACH ITEM]

	Yes	No	
a. Upgrade facility.	1	2	/76
b. Modify current practices.	1	2	/77
c. Obtain risk assessment.	1	2	/78

59. How many facilities, INCLUDING this facility, does the liability insurance cover?

NUMBER OF FACILITIES COVERED: ~~All Gulf Facilities~~ /79-81

60. In the table below, please indicate the number of policies held, the amount of coverage, the annual cost of the policy, and the amount of the deductible for the liability insurance. [IF MORE THAN ONE POLICY IS HELD, INDICATE THE TOTAL COVERAGE, THE TOTAL COST, AND THE AVERAGE DEDUCTIBLE FOR ALL POLICIES IN EACH CATEGORY OF THE TABLE BELOW]

IF MORE THAN ONE FACILITY IS COVERED BY THE POLICY, CHECK HERE ☒ AND ENTER THE AMOUNT OF COVERAGE, COST AND DEDUCTIBLE FOR ALL FACILITIES COVERED.

Type of Policy	Number of Policies	Amount of Coverage	Annual Cost of Policy	Amount of of Deductible
a. Sudden	0	+	_____	_____
b. Nonsudden	0	+	_____	_____
c. Combined policy	3	In excess of \$8 MM	Unable to Segregate	None 0

61. Does the policy cover accidents resulting from sudden or nonsudden releases of hazardous waste which may have occurred prior to the year in which the policy was obtained? [CIRCLE ONLY ONE CODE]

N/A

Yes [GO ON TO QUESTION 62]. 1 9 /103
No [SKIP TO QUESTION 63] 2

62. For how many years prior to the year the policy was obtained is accident liability insurance provided?

N/A

NUMBER OF YEARS PRIOR COVERAGE: 11 /104-105

63. Does the policy cover legal defense costs? [CIRCLE ONLY ONE CODE]

Yes. 1 /106
No 2

PLEASE SIGN THE CERTIFICATION STATEMENT ON PAGE 37 AND RETURN THIS FORM TO EPA IN THE ENVELOPE PROVIDED.

CERTIFICATION STATEMENT

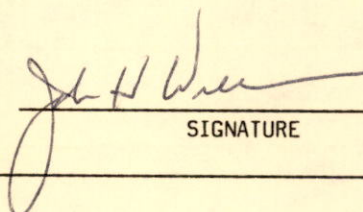
THE OWNER OR THE OPERATOR OF THE FACILITY, OR HIS AUTHORIZED REPRESENTATIVE, MUST SIGN AND DATE THE CERTIFICATION WHERE INDICATED. THE PRINTED OR TYPED NAME OF THE PERSON SIGNING THE CERTIFICATION MUST ALSO BE INCLUDED WHERE INDICATED.

CERTIFICATION:

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

J. H. Williams

PRINT OR TYPE NAME



SIGNATURE

11/8/82

DATE SIGNED

AFTER COMPLETING THIS QUESTIONNAIRE, RETURN IT TO EPA IN THE ENVELOPE ENCLOSED IN THE QUESTIONNAIRE PACKAGE.

IF THIS FACILITY HAS RECEIVED MORE THAN ONE QUESTIONNAIRE, PLEASE RETURN ALL COMPLETED QUESTIONNAIRES IN THE SAME ENVELOPE.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION III

6TH AND WALNUT STREETS
PHILADELPHIA, PENNSYLVANIA 19106

Certified Mail
Return Receipt Requested
December 30, 1981

Mr. R. E. Wohlgemuth
Gulf Oil Corporation - Darby Creek Tank Farm
P.O. Box 7408
Philadelphia, PA 19101

Re: EPA Identification Numbers

Facility Location: Calcon Hook and Hook Roads
Darby Township, PA 19023

Dear Mr. Wohlgemuth:

Shortly after the filing of a Notification of Hazardous Waste Activity form (EPA-8700-12) with the EPA for the above facility, a temporary identification number PAT 00 064 7271 was issued in order to expedite the issuance of I.D. numbers.

A permanent identification number PAD 98 055 5254 has now been assigned for your facility. Realizing that you might have a supply of Manifest forms printed with the temporary number and you may have to contact companies with which you deal, you are permitted to use the temporary number for up to six months. You may, however, start using your permanent number immediately.

It is requested that you let this office know, within 30 days of receipt of this letter, the date you intend to implement the use of the new permanent EPA Identification Number by contacting Joan Henry, a member of my staff, on 215-597-8751 or by writing to: EPA, 6th & Walnut Streets, Philadelphia, PA 19106, Attn: Shirley Bulkin (3EN24). With this information we will have an accurate record of your I.D. number and be able to avoid possible confusion.

Sincerely yours,

Shirley D. Bulkin
Shirley D. Bulkin
Chief, RCRA Administrative Support Section
Permit Enforcement Branch

cc:

Mr. G. Galida

Dept. of Environmental Resources - PA



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION III

6TH AND WALNUT STREETS
PHILADELPHIA, PENNSYLVANIA 19106

JUL 23 1981

Mr. R. E. Wohlgemuth
Gulf Oil Corporation - Darby Creek Tank Farm
P. O. Box 7408
Philadelphia, PA 19101

Dear Mr. Wohlgemuth:

This is to acknowledge that the Environmental Protection Agency has completed processing the information submitted in your Part A Hazardous Waste Permit Application. It is the Agency's opinion, based on the assumption that the information submitted is complete and accurate, you as an owner or operator of a hazardous waste management facility have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. EPA has not verified the information submitted. If it is determined that the information is incomplete or inaccurate, you may be asked to provide additional information or in certain circumstances it may be determined that you do not qualify for interim status. In addition, this notice does not preclude a citizen from taking legal action under the provisions of Section 7002 of RCRA.

A facility not meeting the requirements for interim status under Section 3005 of RCRA may be required to close until such time as a hazardous waste permit is issued. Interim status may also be terminated, according to procedures in 40 CFR Part 124, if the owner or operator fails to furnish additional information which EPA requests in order to process a permit application.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265 or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The enclosure to this letter identifies the processes your facility may use, their design capacities, and types of waste your facility may accept during interim status. This information was obtained from the Part A Permit Application. If you wish to handle new wastes, change processes, increase the design capacity of existing processes, or change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

If you have any questions concerning this letter, please write to the address shown or call Bill Walsh at 215/597-1230.

Sincerely yours,

Shirley D. Bulkin

Shirley D. Bulkin
Chief, Administrative Support Section
Permit Enforcement Branch

Enclosure

CONDITIONS OF OPERATION DURING
INTERIM STATUS

Date Prepared: July 23, 1981

The information shown below is based solely on the information that the owner and operator of this facility submitted in Part A of the Hazardous Waste Permit Application. This is not a determination by EPA that this facility is an environmentally acceptable facility for treating, storing or disposing of the hazardous wastes listed below.

I. Facility name, location, and EPA Identification Number.

Name: Gulf Oil Corporation - Darby Creek Tank Farm

Location: Calcon Hook and Hook Roads
Darby Township, PA 19023

EPA I.D. No.: PAT 00 064 7271

II. EPA considers the following to be the owner or operator of the facility and therefore the person(s) who must comply with the requirements set forth in 40 CFR Parts 122 and 265.

Owner's Name: R. E. Wohlgemuth, Vice President - Northern Region

Operator's Name:

III. During the period of interim status, the facility may use only the following processes for treating, storing or disposing of hazardous waste, up to the design capacities that are indicated.

<u>PROCESS</u>	<u>DESIGN CAPACITY</u>
<u>S02</u>	<u>76,000 Gals.</u>
<u>T01</u>	<u>360,000 Gals./Day</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

IV. During the period of interim status, the facility may handle only the hazardous wastes with the following EPA Hazardous Waste Numbers, and/or solid waste exhibiting hazardous characteristics with the following EPA Hazardous Waste Numbers.

<u>K051</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

RECORD OF
COMMUNICATION

☐ PHONE CALL

☐ DISCUSSION

FIELD TRIP

☐ CONFERENCE

☐ OTHER (SPECIFY)

(Record of item checked above)

TO: Gulf Oil Corp.

FROM: William Budd

DATE 6/22/71

PAT 00 064 7271

TIME

SUBJECT

SUMMARY OF COMMUNICATION

Mr. William's environmental group indicated that the TOI process operated 24 hours per day. The gallons per hour figure was therefore converted to a daily figure on that basis.

CONCLUSIONS, ACTION TAKEN OR REQUIRED

ADDITIONAL INFORMATION COPIES

TO:



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION III
6TH AND WALNUT STREETS
PHILADELPHIA, PENNSYLVANIA 19106

EPA I.D. # PAT000647271

December 18, 1980

Gulf Oil Corp Darby Creek Tank Farm
Mr. John Williams
Box 7408
Phila., Pa. 19101

Re: Acknowledgment of Application for
a Hazardous Waste Permit

This is to acknowledge that the Environmental Protection Agency has received: (1) A notification pursuant to Section 3010 of the Resource Conservation and Recovery Act for the facility located at the address shown above; and (2) Part A of a Hazardous Waste Permit Application for that facility, including a signed statement that the operation of the facility, or its construction, began prior to November 19, 1980. While the information provided by these submissions has not been fully reviewed for completeness or accuracy, EPA will accept this information as an initial qualification for interim status pursuant to Section 3005 of the Act. If after further review of this information, EPA determines that the owner or operator did not fulfill all the requirements for interim status, EPA may treat the owner or operator as not having qualified for interim status pursuant to that section and will advise the owner or operator of that determination. Facility owners and operators with interim status must comply with the standards set forth at 40 CFR Part 265 until a permit is issued. Interim status may be terminated if the owner or operator fails to furnish any additional information requested by EPA in order to process a permit application.

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION III
841 Chestnut Building
Philadelphia, Pennsylvania 19107

SUBJECT: CHANGES TO THE FOLLOWING C1105/C305 CODES

DATE:

FROM: Dianne Stedman (3HW11)

TO: Joanne Cassidy (3HW34)

FACILITY NAME: Chevron USA Inc. DCTF

EPA ID#: PAD-980555254

PRESENT C1105 CODE 4

PRESENT C305 CODE 5

CORRECT C1105 CODE _____

CORRECT C305 CODE _____

The current status of the above facility is:

- ☐ Certified Closure
- ☐ State confirms facility no longer a TSD.
- ☐ State confirms facility is a less than 90 day storage
- ☐ No closure is necessary
- ☐ The facility converted to Generator status w/o full closure
- ☐ The facility is a Transporter

Additional information on the status of this facility.

Signature of Compliance Officer

Date

DATE CHANGE ON THE C1105/C305 CODE AND RETURN TO (3HW11) _____

Gulf Refining and Marketing Company

PHILADELPHIA REFINERY

F. A. Becker
REFINERY MANAGER
D. J. Bindewald
MANAGER-ENGINEERING & CONSTRUCTION
D. E. Wilder
MANAGER-FINANCIAL & SERVICES
Q. L. Wallerstedt
MANAGER-HUMAN RESOURCES
S. Kutach
MANAGER-OPERATIONS

November 9, 1982

P. O. Box 7408
Philadelphia, PA 19101

U. S. Environmental Protection Agency
Office of Solid Waste
Room S-273
401 M Street S.W.
Washington, D.C. 20460

Attention: George Garland

Gentlemen:

PAD 980555254

Enclosed are three (3) completed questionnaires; Hazardous Waste Generator, Hazardous Waste Tank, and Hazardous Waste Treatment, Storage and Disposal General, as requested in your correspondence dated August 17, 1982.

Any questions in this matter should be directed to Mr. J. H. Williams, Director - Process Engineering, (215) 339-7125.

Very truly yours,


F. A. Becker

FLH/jnb
Enclosures



A DIVISION OF GULF OIL CORPORATION

Hazardous Waste Quantity Notification

Business Name CHEVRON USA INC DCTF
Business Address CALGON HOOK & HOOK ROADS
DARBY PA
P.O. BOX 7408 PHILA PA 19101
EPA ID Number PAD 980555254

Hazardous Waste Generated

0 - 100 kg/month ☒

100 - 1000 kg/month ☐

1000 kg/month or more ☐

THIS FACILITY DOES NOT GENERATE ANY HAZARDOUS WASTE
THERE FOR WE DO NOT INTEND TO FILE A PART B APPLICATION.
WE WILL CONTINUE TO IDENTIFY THE FACILITY WITH OUR
EXISTING EPA I.D. NUMBER IN THE EVENT OUR STATUS CHANGES.

J. N. Wall - Director Tech. Services

Signature and Title

C. J. Waller
11/22/01



Official Business
Penalty for Private Use
\$300

FIRST-CLASS MAIL
POSTAGE & FEES PAID
EPA
PERMIT NO. G-35

United States
Environmental Protection
Agency

Washington DC 20460

JOHN A ARMSTEAD
VA/WV SECTION (3HW31)
US EPA REGION III
841 CHESTNUT ST.
PHILADELPHIA, PA 19107

EPA Form 5180-11 (5-79)



GULF OIL COMPANY - U. S.
PROCESS ENGINEERING - PHILADELPHIA REFINERY

PaDER AIR QUALITY
OPERATING PERMITS
FOR DARBY CREEK TANK FARM

23-302-073

23-312-117

23-312-118

23-312-086



Gulf Oil Company - U.S.

P. O. Box 7408
Philadelphia, PA 19101

FORM 3 RCRA	EPA	HAZ	ENVIRONMENTAL PROTECTION AGENCY DOUS WASTE PERMIT APPLICATION Consolidated Permits Program (This information is required under Section 3005 of RCRA.)	I. EPA I.D. NUMBER											
				S P A T 0 0 0 6 4 7 2 7 1											

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS
23	24 - 29	

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

<input checked="" type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)	<input type="checkbox"/> 2. NEW FACILITY (Complete item below.)																		
71	71																		
<table border="1"><tr><td>YR.</td><td>MO.</td><td>DAY</td></tr><tr><td>8</td><td>4</td><td>9</td></tr><tr><td>15</td><td>73</td><td>74</td></tr></table>	YR.	MO.	DAY	8	4	9	15	73	74	<table border="1"><tr><td>YR.</td><td>MO.</td><td>DAY</td></tr><tr><td></td><td></td><td></td></tr><tr><td>73</td><td>74</td><td>75</td></tr></table>	YR.	MO.	DAY				73	74	75
YR.	MO.	DAY																	
8	4	9																	
15	73	74																	
YR.	MO.	DAY																	
73	74	75																	
FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)																			
FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN																			

B. REVISED APPLICATION (place an "X" below and complete Item I above)

<input type="checkbox"/> 1. FACILITY HAS INTERIM STATUS	<input type="checkbox"/> 2. FACILITY HAS A RCRA PERMIT
72	72

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.
2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:					
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS.....	G	LITERS PER DAY.....	V	ACRE-FEET.....	A
LITERS.....	L	TONS PER HOUR.....	D	HECTARE-METER.....	F
CUBIC YARDS.....	Y	METRIC TONS PER HOUR.....	W	ACRES.....	B
CUBIC METERS.....	C	GALLONS PER HOUR.....	E	HECTARES.....	Q
GALLONS PER DAY.....	U	LITERS PER HOUR.....	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

S												T/A		C																					
C												DUP		1																					
1 2												13 14		15																					
LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY										FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY										FOR OFFICIAL USE ONLY										
		1. AMOUNT (specify)					2. UNIT OF MEASURE (enter code)								1. AMOUNT					2. UNIT OF MEASURE (enter code)															
X-1	S 0 2	600					G						5																						
X-2	T 0 3	20					E						6																						
1	S 0 2	76,000					G						7																						
2	T 0 1	360,000 15,000 X 24					U E						8	see note																					
3													9																						
4													10																						
16 - 18 19												27		28		29 - 32		16 - 18 19												27		28		29 - 32	

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

None

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE
POUNDS.....	P
TONS.....	T

METRIC UNIT OF MEASURE	CODE
KILOGRAMS.....	K
METRIC TONS.....	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO. JZ	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY												
S													S												
T/A C													T/A C												
W P A T 0 0 0 6 4 7 2 7 1													W DUP												
1 2 13 14 15													1 2 13 14 15 23 26												
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																									
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE				C. UNIT OF MEASURE (enter code)		D. PROCESSES														
	23	24	25	26	27	28	29	30	31	32	1. PROCESS CODES (enter)				2. PROCESS DESCRIPTION (if a code is not entered in D(1))										
1	K	0	5	1	80				T		S	0	2	T	0	1									
2																									
3																									
4																									
5																									
6																									
7																									
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25																									
26																									

IV. DESCRIPTION OF HAZARDOUS WASTE

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

None

EPA I.D. NO. (enter from page 1)

S	F	P	A	T	0	0	0	6	4	7	2	7	1	T/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

3	9	5	3	3	5	0
65	66	67	68	69	70	71

LONGITUDE (degrees, minutes, & seconds)

0	7	5	1	5	3	5	0
72	73	74	75	76	77	78	79

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & number)

C	E	Not Applicable
15	16	

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

C	F	Not Applicable
17	18	

C	G
45	46

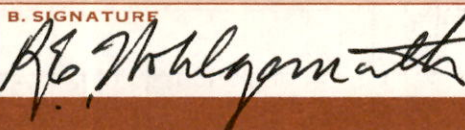
IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

R. E. WOHLGEMUTH
VICE PRESIDENT-NORTHERN REGION

B. SIGNATURE



C. DATE SIGNED

NOV. 13 1980

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

EPAT000647271 D

LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

PAD 98 055 5254
GULF OIL CORP.-DARBY CREEK TANK FARM

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK 'X'			SPECIFIC QUESTIONS	MARK 'X'		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X	NO	*	D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)			
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X		YES	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

NAME OF FACILITY

GULF OIL CORP. - DARBY CREEK TANK FARM

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
WILLIAMS, JOHN, DIR. PROCESS. ENG.	215 339 7125

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
P.O. BOX 7408	PHILADELPHIA	PA	19101

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME	C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
CALCON HOOK AND HOOK ROADS	DELAWARE	DARBY TOWNSHIP	PA	19023	

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND											
C	7	2	9	1	1	(specify) Petroleum Refining					C	7	(specify)								
15	16	17	18	19						15	16	17	18	19							
C. THIRD										D. FOURTH											
C	7	(specify)									C	7	(specify)								
15	16	17	18	19						15	16	17	18	19							

VIII. OPERATOR INFORMATION

A. NAME																																																		B. Is the name listed in Item VIII-A also the owner?									
C	8	GULF OIL COMPANY U.S.																																																<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO									
15	16																																																	66									
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																														D. PHONE (area code & no.)																													
F = FEDERAL										M = PUBLIC (other than federal or state)										P = PRIVATE										O = OTHER (specify)										C	A	2	1	5	3	3	9	7	0	0	0								
																																								15	16	17	18	19	20	21	22	23	24	25									
E. STREET OR P.O. BOX																																																											
P.O. BOX 7408																																																											
F. CITY OR TOWN																				G. STATE					H. ZIP CODE					IX. INDIAN LAND																													
C	B	PHILADELPHIA															PA					19101					Is the facility located on Indian lands?																																
15	16																40					41					42					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO																											
																									52																																		

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)															D. PSD (Air Emissions from Proposed Sources)														
C	T	I	9	N	PA 0011541										C	T	I	9	P										
15	16	17	18	19											15	16	17	18	19										
B. UIC (Underground Injection of Fluids)															E. OTHER (specify)														
C	T	I	9	U											C	T	I	9		4185									
15	16	17	18	19											15	16	17	18	19										
C. RCRA (Hazardous Wastes)															E. OTHER (specify)														
C	T	I	9	R											C	T	I	9		See Attached									
15	16	17	18	19											15	16	17	18	19										
															(specify) Operation of Private Darby Township PA landfill.														
															(specify) Air Quality Operating Permits PaDER.														

XI. MAP

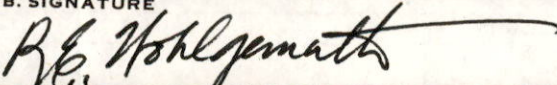
Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

The facility is used for the storage of various crude oils that arrive by pipeline from the unloading facilities located on the Delaware River. The product is then transferred by pipeline to the refinery. This facility is an integral part of the refinery.

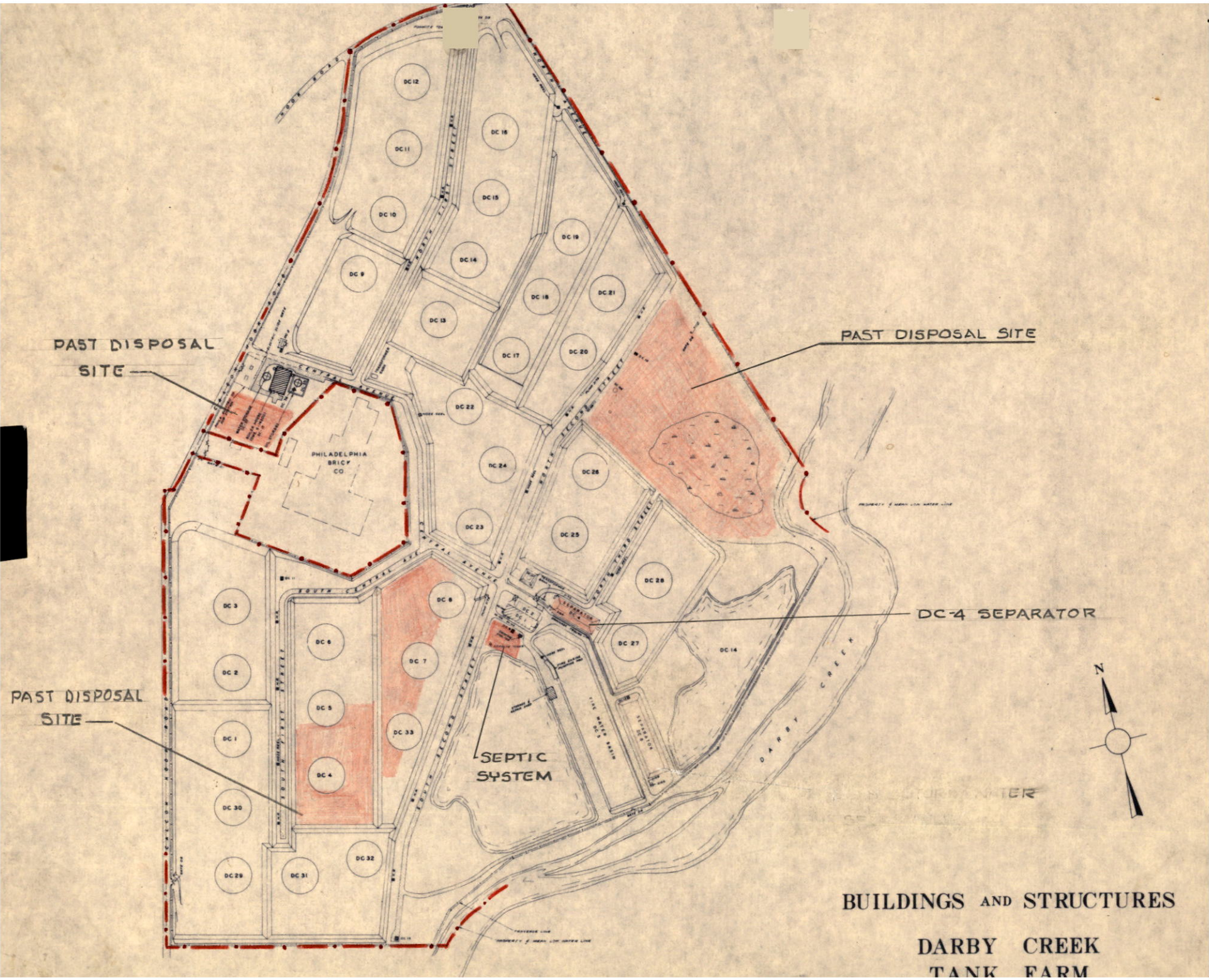
XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
R. E. WOHLGEMUTH VICE PRESIDENT-NORTHERN REGION				NOV. 13 1980	

COMMENTS FOR OFFICIAL USE ONLY

C																																																	
15	16																																																



PAST DISPOSAL
SITE

PAST DISPOSAL SITE

PAST DISPOSAL
SITE

DC-4 SEPARATOR

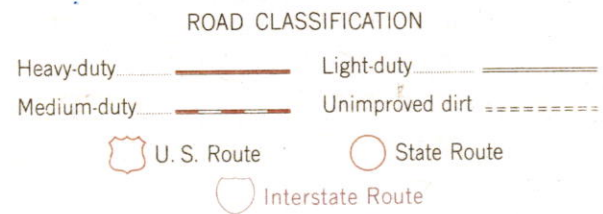
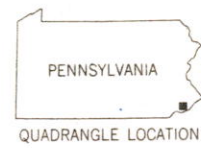
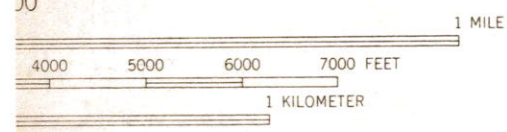
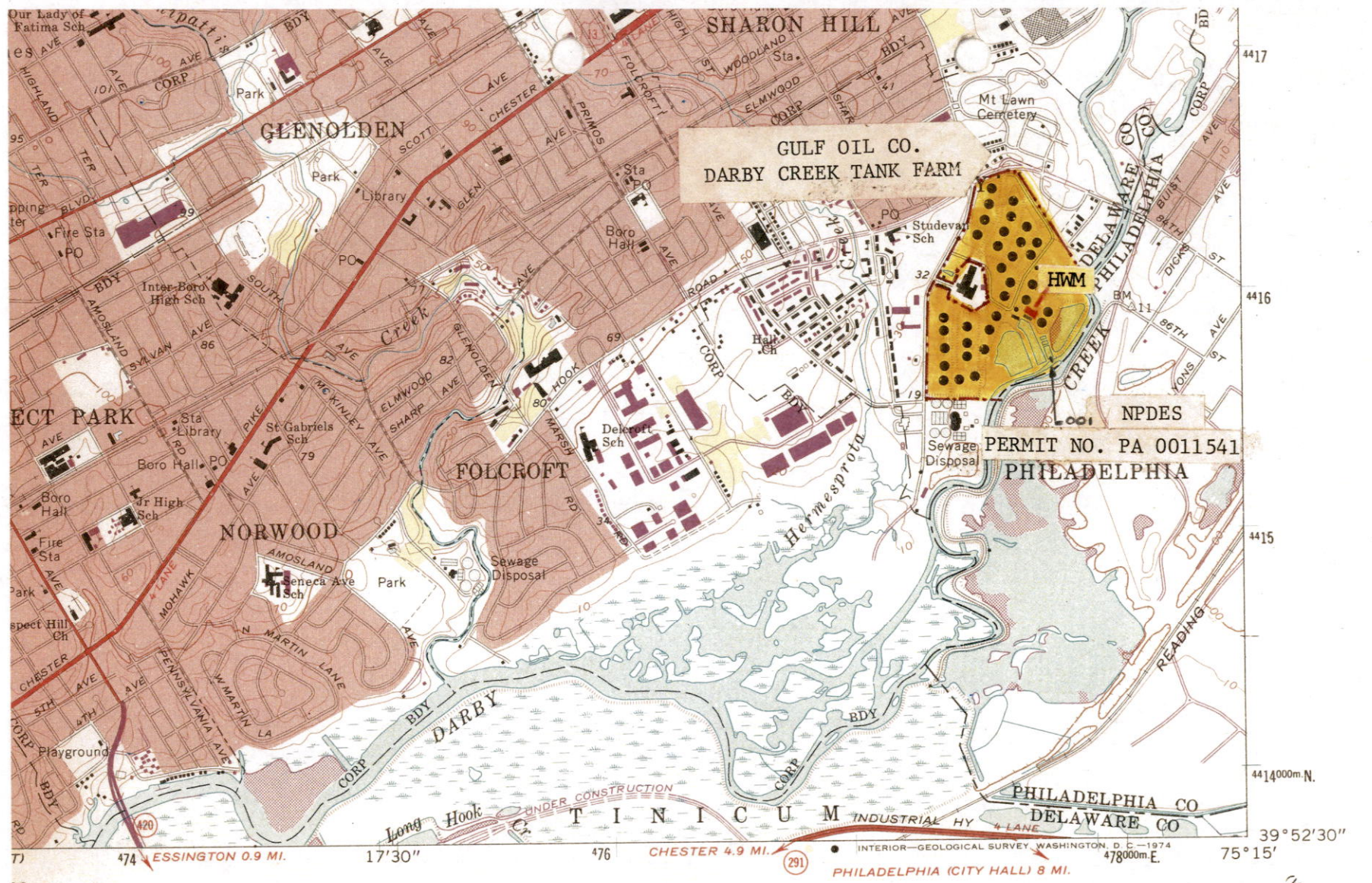
SEPTIC
SYSTEM

BUILDINGS AND STRUCTURES

DARBY CREEK
TANK FARM



DCTF - DC-4



1AP ACCURACY STANDARDS
EY, WASHINGTON, D. C. 20242
SYMBOLS IS AVAILABLE ON REQUEST

LANSDOWNE, PA.
N3952.5—W7515/7.5
1967
PHOTOREVISED 1973
AMS 5963 IV NE—SERIES V831